



## Complete Summary

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### TITLE

Advanced chronic kidney disease (CKD): percent of patients with documentation about counseling for increasing physical activity.

### SOURCE(S)

Renal Physicians Association. Appropriate patient preparation for renal replacement therapy. Rockville (MD): Renal Physicians Association; 2002 Oct 1. 78 p. (Clinical Practice Guideline; no. 3).

## Brief Abstract

### DESCRIPTION

This measure assesses the percent of patients with advanced chronic kidney disease (CKD) with documentation about counseling for increasing physical activity.

### RATIONALE

Exercise counseling improves measures of physical functioning and work capacity in non-renal impaired persons, reduces overall mortality, and prevents deterioration in physical functioning.

Physical activity is an important component of health. Physicians are encouraged in several national guidelines to recommend routinely that patients exercise regularly. Although physicians do not typically advise patients about physical activity, they are more likely to counsel patients at high risk for a disease and patients with a known disease. Such counseling has been shown to result in sustained improvements in cardiorespiratory fitness in inactive adults without serious chronic diseases.

In patients on hemodialysis, interventions to increase physical activity have been shown in five studies to improve well-being and exercise capacity. A recent large controlled study showed that exercise training and encouragement can result in improvements in physical functioning in end-stage renal disease (ESRD) patients. Furthermore, even ESRD patients with low levels of physical functioning can benefit from exercise counseling in self-reported and objective measures of physical function. Two prospective studies of hemodialysis patients have shown that physical functioning is highly predictive of hospitalization and mortality, suggesting that exercise training or counseling may result in improved survival through its effect on physical functioning or other physiological outcomes.

Exercise training has been reported in two studies to increase hemoglobin levels in hemodialysis patients.

Patients with advanced CKD may be better able than dialysis patients to undertake increased physical activity because usually they have better functional status and less co-morbidity. Furthermore, these patients may benefit more from exercise than patients on renal replacement therapy (RRT), as suggested by one study directly comparing the effects of exercise in pre-dialysis and dialysis patients.

The body of research testing the effect of exercise counseling or training in these patients demonstrates that, as in healthy individuals or dialysis patients, they can increase muscle strength and exercise capacity, however, the studies are too small to detect potential benefits of exercise on other health outcomes.

Exercise counseling studies indicate that improvements in performance-based measures of physical functioning and exercise capacity can occur without resource-intensive supervised exercise therapy. Furthermore, these studies suggest improvements in symptoms and quality of life.

#### PRIMARY CLINICAL COMPONENT

Advanced chronic kidney disease; physical activity; counseling

#### DENOMINATOR DESCRIPTION

The number of adult patients with advanced chronic kidney disease (CKD), not currently receiving renal replacement therapy

#### NUMERATOR DESCRIPTION

The number of patients from the denominator with documentation about counseling for increasing physical activity

### Evidence Supporting the Measure

#### PRIMARY MEASURE DOMAIN

Process

#### SECONDARY MEASURE DOMAIN

Not applicable

#### EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

A formal consensus procedure involving experts in relevant clinical,

methodological, and organizational sciences  
A systematic review of the clinical literature

#### NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Appropriate patient preparation for renal replacement therapy.](#)

#### Evidence Supporting Need for the Measure

##### NEED FOR THE MEASURE

Unspecified

#### State of Use of the Measure

##### STATE OF USE

Pilot testing

##### CURRENT USE

Internal quality improvement

#### Application of Measure in its Current Use

##### CARE SETTING

Ambulatory Care  
Physician Group Practices/Clinics

##### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

##### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

##### TARGET POPULATION AGE

Age greater than or equal to 18 years

##### TARGET POPULATION GENDER

Either male or female

##### STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

## Characteristics of the Primary Clinical Component

### INCIDENCE/PREVALENCE

Unspecified

### ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

### BURDEN OF ILLNESS

Two prospective studies of hemodialysis patients have shown that physical functioning is highly predictive of hospitalization and mortality, suggesting that exercise training or counseling may result in improved survival through its effect on physical functioning or other physiological outcomes.

### EVIDENCE FOR BURDEN OF ILLNESS

Curtin RB, Lowrie EG, DeOreo PB. Self-reported functional status: an important predictor of health outcomes among end-stage renal disease patients. *Adv Ren Replace Ther* 1999 APR; 6(2): 133-40.

DeOreo PB. Hemodialysis patient-assessed functional health status predicts continued survival, hospitalization, and dialysis-attendance compliance. *Am J Kidney Dis* 1997 Aug; 30(2): 204-12. [26 references] [PubMed](#)

### UTILIZATION

Unspecified

### COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

### IOM CARE NEED

Living with Illness

### IOM DOMAIN

Effectiveness

## CASE FINDING

Users of care only

## DESCRIPTION OF CASE FINDING

Adult patients 18 years and older with advanced chronic kidney disease (CKD)

## DENOMINATOR (INDEX) EVENT

Clinical Condition

## DENOMINATOR INCLUSIONS/EXCLUSIONS

### Inclusions

Adult patients age 18 years and older with chronic kidney disease stage 4 or 5 (glomerular filtration rate [GFR] less than or equal to 30 mL/min/1.73 m<sup>2</sup>), not currently receiving renal replacement therapy

### Exclusions

Unspecified

## NUMERATOR INCLUSIONS/EXCLUSIONS

### Inclusions

The number of patients from the denominator with documentation about counseling\* for increasing physical activity

\*Counseling includes documentation regarding discussion with the patient or a formal consultation with a physical therapist or an exercise program.

### Exclusions

Unspecified

## DENOMINATOR TIME WINDOW

Time window precedes index event

## NUMERATOR TIME WINDOW

Episode of care

## DATA SOURCE

Administrative data

Laboratory data

Medical record

## LEVEL OF DETERMINATION OF QUALITY

Individual Case

## PRE-EXISTING INSTRUMENT USED

Unspecified

## Computation of the Measure

## SCORING

Rate

## INTERPRETATION OF SCORE

Better quality is associated with a higher score

## ALLOWANCE FOR PATIENT FACTORS

Unspecified

## STANDARD OF COMPARISON

Internal time comparison

## Evaluation of Measure Properties

## EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

## ORIGINAL TITLE

Number of patients with documentation about counseling for increasing physical activity / number of patients with advanced CKD.

## MEASURE COLLECTION

[Renal Physicians Association Clinical Performance Measures on Appropriate Patient Preparation for Renal Replacement Therapy](#)

## MEASURE SET NAME

[Renal Physicians Association Clinical Performance Measures for Counseling and Rehabilitation Recommendations](#)

## DEVELOPER

Renal Physicians Association

## ADAPTATION

Measure was not adapted from another source.

## RELEASE DATE

2002 Oct

## MEASURE STATUS

This is the current release of the measure.

## SOURCE(S)

Renal Physicians Association. Appropriate patient preparation for renal replacement therapy. Rockville (MD): Renal Physicians Association; 2002 Oct 1. 78 p. (Clinical Practice Guideline; no. 3).

## MEASURE AVAILABILITY

The individual measure, "Number of patients with documentation about counseling for increasing physical activity / number of patients with advanced CKD," is published in "Renal Physicians Association Clinical Practice Guideline #3: Appropriate Patient Preparation for Renal Replacement Therapy."

For more information, contact RPA at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; phone: 301-468-3515; fax: 301-468-3511; Web site: [www.renalmd.org](http://www.renalmd.org); e-mail: [rpa@renalmd.org](mailto:rpa@renalmd.org).

## NQMC STATUS

This NQMC summary was completed by ECRI on May 23, 2003. The information was verified by the Renal Physicians Association on June 17, 2003.

## COPYRIGHT STATEMENT

This NQMC summary is based on the original measure, which is subject to the measure developer's copyright restrictions.

For more information, contact RPA at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; phone: 301-468-3515; fax: 301-468-3511; Web site: [www.renalmd.org](http://www.renalmd.org); e-mail: [rpa@renalmd.org](mailto:rpa@renalmd.org).

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